

REPLY TO: Internal Revenue Service  
MS. L. GIBSON  
ONE SKYLINE PLACE  
5205 LEESBURG PIKE, STE 600  
BAILEYS CROSSROADS, VA 22041-3802

TELEPHONE NUMBER  
OF IRS OFFICE: (703)647-5586

NAME AND ADDRESS OF TAXPAYER:  
JOHN T MAHONEY  
126 ROBERTS LANE APT 300  
ALEXANDRIA, VA 22314-5336

TO: SOCIAL SECURITY ADMINISTRATION  
ATTN: MARK A. SILVESTRI  
DIVISION OF CENTRAL ACCOUNTING OPER  
HD4170 P O BOX A  
CRESSON, PA 16699-0001

IDENTIFYING NUMBER(S): 180-30-0053

MAHO

Kind of Tax	Tax Period Ended	Unpaid Balance of Assessment	Statutory Additions	Total
1040	12/31/2004			
1040	12/31/2005	\$26,455.36	\$1,764.32	\$28,219.68
1040	12/31/2006	\$32,894.48	\$1,464.67	\$34,359.15
1040	12/31/2008	\$107,376.28	\$6,114.42	\$113,490.70
		\$166,619.83	\$25,820.35	\$192,440.18
Total Amount Due →				\$368,509.71

We figured the interest and late payment penalty to 08/15/2012

**THIS ISN'T A BILL FOR TAXES YOU OWE. THIS IS A NOTICE OF LEVY TO COLLECT MONEY OWED BY THE TAXPAYER NAMED ABOVE.**

The Internal Revenue Code provides that there is a lien for the amount shown above. Although we have given the notice and demand required by the Code, the amount owed hasn't been paid. This levy requires you to turn over to us: (1) this taxpayer's wages and salary (if you have been earned but not paid, as well as wages and salary earned in the future until this levy is released, and (2) this taxpayer's other income that you have now or for which you are obligated.

We levy this money to the extent it isn't exempt, as shown in the instructions. Don't offset money this person owes you without contacting us at the telephone number shown above for instructions.

If you don't owe money to this taxpayer, please call us at the telephone number at the top of this form. Instead of calling us you may complete the back of Part 3, attach it as a cover to the rest of this form, and return all parts to IRS in the enclosed envelope.

If you do owe money to this taxpayer, please see the back of this page for instructions on how to act on this notice.

Signature of Service Representative  
MS. L. GIBSON

Title  
REVENUE OFFICER

Part 1 - For Employer or other Addressee Catalog No. 35390F

[www.irs.gov](http://www.irs.gov)

Form 668-W(ICS) (7-2010)

Exhibit # 63  
Levy Form for  
Embassy